Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			4				1	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770:00
TOTAL CHARGEABLE CLAIMS			4 minus 20=		*			X\$ 9=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	minus 3 =		*			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	710
(Column 1) (Column 2) (Column 3)							<u> </u>	SMALL E	NTITY	OR	OTHER SMALL	1
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 3	Minus	** ~		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	ANN	レ	<u> </u>		X43=		OR	X8 6 =	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		ا ا	+145=		OR	+290=	
							ŧ	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)		ADDIT. FEE			ADDITECT	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	thit		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=] [X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		ا ل	+145=		OR	+290=	
							į.	TOTAL EEP TIGG		ΩB	TOTAL ADDIT, FEE	•
	_	(Column 1)		(Colun	nn 2)	(Column 3)		10011 -55 1		,	ADDIT, PEET	
≲	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	\int	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	ana.		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	44-4		=]	X43=			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3										OR	+290=	
** !!	the "Highest Nur	nber Previously Pa mber Previously Pa	d For IN THIS	SPACE is	less than	20. enter "20.	· A	DDIT. FEE		OR ,	ADDIT. FEE	
		ber Previously Paid					er four	nd in the appr	opriate box	in col	սոր 1.	1